

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005069

Entity Name: SMARTMATIC CORPORATION

FILED
Feb 17, 2004
Secretary of State

Current Principal Place of Business:

6400 CONGRESS AVE
STE 1300
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

6400 CONGRESS AVE
STE 1300
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 52-2243719 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANZOLA, ALFREDO
6400 CONGRESS AVE
STE 1300
BOCA RATON, FL 33487

Name and Address of New Registered Agent:

ANZOLA, ALFREDO
6400 CONGRESS AVE
STE 1300
BOCA RATON, FL 33487

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

02/17/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MUGICA, ANTONIO
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: VSTD () Delete
Name: ANZOLA, ALFREDO
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: CD () Delete
Name: MUGICA RIVERO, ANTONIO
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: D () Delete
Name: PINATE, ROGER
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: D () Delete
Name: MUGICA SESMA, ANTONIO
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALFREDO ANZOLA

VSTD

02/17/2004

Electronic Signature of Signing Officer or Director

Date